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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport Bring your picture identification to your meeting with the trustee.	Joseph First name D. Middle name Lanza Last name Suffix (Sr., Jr., II, III)	Laura First name R. Middle name Lanza Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	First name Middle name Last name First name Middle name Last name	Laura First name R. Middle name Kaeding Last name First name Middle name Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	XXX - XX- 1944 OR 9 xx - xx-	XXX - XX- 1289 OR 9 xx - xx-

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Debtor	1 Joseph First Name		anza ast Name	Case number (if kno	own)	
		About Debtor 1:		About Debto	r 2 (Spouse Only	in a Joint Case):
and	y business names d Employer	I have not used any business na Mavrik Enterprises LLC	mes or EINs.	✓ I have not	used any business n	ames or EINs.
	entification mbers (EIN) you	Business name		Business nar	ne	
	ve used in the last					
8 y	ears	Business name		Business nar	ne	
	ude trade names and	4744-53950				_
doir	ng business as names	EIN		EIN		
		EIN		EIN		
5. Wh	ere you live			If Debtor 2 liv	es at a different add	dress:
		7808 East Brick School Road		7808 East Brick	School Road	
		Number Street		Number	Street	
		Park Oh III arts	04070	David O'le	100 1-	04070
		Rock City Illinois City State	61070 Zip Code	Rock City City	Illinois State	61070 Zip Code
		Stephenson		Stephenson		
		County		County		
		If your mailing address is differe above, fill it in here. Note that the notices to you at this mailing address	court will send any		Note that the court v	different from yours, vill send any notices to
		Number Street		Number	Street	
		City State	Zip Code	City	State	Zip Code
	y you are oosing this district	Check one:		Check one:		
	file for bankruptcy	Over the last 180 days before filing lived in this district longer than in	ng this petition, I have any other district.	Over the lived in this	ast 180 days before fi s district longer than	ling this petition, I have in any other district.
		I have another reason. Explain. ((See 28 U.S.C. §§ 1408.)
			,			,
						_

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Debtor 1 Joseph	D.		Case number (if known)	
First Name	Middle Name	Last Name		
Part 2: Tell the Court Abo	out Your Bankruptcy	Case		
7. The chapter of the Bankruptcy Code you are choosing to file under		f description of each, see <i>Notice Req</i> oit0). Also, go to the top of page 1 and		Individuals Filing for
8. How you will pay the fee	more details about cashier's check, of may pay with a critical pay the Individuals to Pay I request that my judge may, but is the official poverty you choose this contact that it is to be a contact to the contact that is the official poverty ou choose this contact that is contact to the contact that is the official poverty ou choose this contact that is the contac	ire fee when I file my petition. Plant how you may pay. Typically, if your money order If your attorney is edit card or check with a pre-printer of the ininstallments. If you choose of y Your Filing Fee in Installments (Or fee be waived (You may request not required to, waive your fee, and y line that applies to your family significant, you must fill out the Application in the interpretation.	ou are paying the fee yourseling submitting your payment or each address. The this option, sign and attach official Form 103A). This option only if you are filled may do so only if your income and you are unable to pay	f, you may pay with cash, in your behalf, your attorney in the <i>Application for</i> ing for Chapter 7. By law, a some is less than 150% of your the fee in installments). If
9. Have you filed for bankruptcy within the last 8 years?	V No. Yes. District District District	When When When	Case number MM / DD / YYYY	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor District Debtor District	<u>W</u> hen	Relationship to Case number Relationship to MM / DD / YYYY Case number	to you
11. Do you rent your residence?	✓ No. Go	dlord obtained an eviction judgment a to line 12. out <i>Initial Statement About an Eviction</i> bankruptcy petition.		

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D. Debtor 1 Joseph Lanza Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Mavrik Enterprises LLC A sole proprietorship Name of business, if any is a business you operate as an 7808 East Brick School Road individual, and is not a Number Street separate legal entity such as a corporation, partnership, or LLC. If you have more than Rock City Illinois 61070 one sole City State Zip Code proprietorship, use a separate sheet and Check the appropriate box to describe your business: attach it to this Health Care Business (as defined in 11 U.S.C. § 101(27A)) petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{\mathsf{A}}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1
 Joseph
 D.
 Lanza
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit ✓ I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Joseph First Name		nnza Case n	umber (if known)
	estions for Reporting Purposes	ot ivane	
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual p No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily by	orimarily for a personal, famil ousiness debts? Business de vestment or through the ope	ebts are debts that you incurred to obtain ration of the business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fur		y exempt property is excluded and administrative e to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	nillion
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	nillion
Part 7: Sign Below	11		and the state of t
For you	correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may understand the relief availab	perjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 ble under each chapter, and I choose to proceed someone who is not an attorney to help me fill
	out this document, I have obtaind I request relief in accordance with I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 15 /s/ Joseph Lanza Signature of Debtor 1	ed and read the notice requirent the chapter of title 11, Uniterent, concealing property, use can result in fines up to \$	red by 11 U.S.C. § 342(b). red States Code, specified in this petition. or obtaining money or property by fraud in 250,000, or imprisonment for up to 20 years, or /s/ Laura Lanza Signature of Debtor 2
	Executed on 2/15/2017 MM / DD /	/ YYYY	Executed on 2/15/2017 MM / DD / YYYY

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Debtor 1 Joseph	D.	Lanza	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the llso certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the	information in the sched	ules filed with the petition is incorrect.
attorney, you do not	4.5			·
need to file this page.	/s/ Dan Springer		Date	2/15/2017
	Signature of Attorney	for Debtor		M / DD / YYYY
	· ·			
	Dan Springer			
	Printed name			
	Springer Law			
	Firm name			
	2222 E State St.			
	Street			
	# 107			
	<u>" 107</u>			
	Rockford		Illinois	61104
	City		State	Zip Code
	Contact phone	8155707016	Email address	dspringerlaw@gmail.com
			_	
			Illinois	
	Bar number		State	

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Fill in this info	rmation to identify yo	ur case:				
Debtor 1	Joseph	. D.	Lanza		İ	
	First Name	Middle Name	Last Name	:		
Debtor 2	Laura	R.	Lanza			
(Spouse, if filing)	First Name	Middle Name	Last Name)	_	
United States	Bankruptcy Court for t	he: Northern	District of Illinois		_	•
Case number			(State)		
(if known)					_	
Official	Form 103/	<u> </u>				Check if this is ar amended filing
Applicat	ion for Indiv	iduals to Pay th	e Filing Fe	e in In	stallments	12/15
-	ete and accurate	as possible. If two marri	ed people are fil	ing togeth	er, both are equally responsible t	or supplying correct
nformation.						
Part 1: Spe	cify Your Propose	d Payment Timetable				
1. Which cha	pter of the Bankrup	tcy Code	Chapter 7	,		<u> </u>
are you ch	oosing to file under!	?	Chapter 11			
			Chapter 12			
			<u> </u>			
			Chapter 13			
2. You may a	pply to pay the filing	, fee in up to four				
		ts you propose to pay	You propose t	o pay		
		them. Be sure all dates le payments you propose		- \$83.75	With the filing of the petition	
to pay.	aa daya. Tilefi buu ti	ie payments you propose			leme)	TIMOREI
Vou must r	ronoco to nov the ont	ire fee no later than 120			On or before this date	DD/YYYY
	ou file this bankruptcy				Affi	Malant
	our application, the co	urt will set your final		\$83.75	On or before this date	10/00/
payment tir	netable.				4	1111000
				\$83.75	On or before this date	16/3/0/ /
					MM/	4. 10 · m
			+	\$83.75	On or before this date	15/2017
					ny ny ny	אייי לעט אייי אייי
		To	tal	\$335.00	Your total must equal the entire fee	ofor the chapter
					you checked in line 1.	
Part 2: Sign	Below					
						ment on the section of the section o
that:	ere, you state that yo	ou, are unable to pay the full	ming tee at once,	that you wa	ant to pay the fee in installments, and	that you understand
≋ You mu:	st pav vour entire filing	ı fee before vou make anv mo	re payments or trans	sfer any more	e property to an attorney, bankruptcy pet	tion preparer, or
		nection with your bankruptcy			. , , , , , , , , , , ,	
	st pay the entire fee no ed until your entire fee		first file for bankrup	tcy, unless t	he court later extends your deadline. You	r debts will not be
≋ If you do affected.	not make any payme	ent when it is due, your bankn	uptcy case may be o	lismissed, ar	nd your rights in other bankruptcy procee	dings may be
•	(/	77 6		1	•	
	eph Lanza	/s/ Laura L	1 1127-07-17-	11lemal	/s/ Dan Springer	and the same of th
Signatu	re of Debtor 1	Signature of	f Debtor 2	11	Your attorney's name and signatu	re, if you used one

Signature of Debtor 1

MM / DD / YYYY

Date 2/2/2017

Date 2/2/2017

MM / DD / YYYY

Date 2/2/2017

MM / DD / YYYY

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Debtor 1	Joseph	D.	Lanza
	First Name	Middle Name	Last Name
Debtor 2	Laura	R.	Lanza
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
		•	(State)
Case number			•

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. 68 152, 1341, 1519, and 3571.

U.S.	C. 93 102, 1341, 1019, and 3571.	
Pa	rt 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
	☑ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Haday analty of parity of backet best I have good the summons.	and schodules filed with this declaration and
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules liked with this declaration and
×	/s/ Joseph Lanza	* 15/ Laura Lanza Jama Duma
	Signature of Debtor 1	Signature of Debtor 2
	Date 2/2/2017 MM/DD/YYYY	Date 2/2/2017 MM/DD/YYYY

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Debtor 1		D.	Lanza	Case number (if known)
	First Name	Middle Name	Last Name	i. Kasarina sustembre ti en settembre as sastembre un autorionio socio como til como describio como como de socio
	thin 2 years before y editors, or other par		you give a financial state	ment to anyone about your business? Include all financial institutions,
	No Yes. Fill in the deta	ilis below.		
- Instant	•		Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	City	State Zip Code	<u> </u>	
		p =====		
Part 12:	Sign Below			
true :	and correct. I under nkruptcy case can re	stand that making a false st	atement, concealing prop	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signatur	e of Debtor 1		Signature of Debtor 2
	Date 2	/2/2017		Date 2/2/2017
Did yo	ou attach additional	pages to Your Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
✓	lo			
٦٧	'es			
Did ye	ou pay or agree to p	ay someone who is not an a	ttorney to help you fill ou	t bankruptcy forms?
☑ N	lo			
	es. Name of person			Attach the Bankruptcy Pelition Preparer's Notice, Declaration, and Signature (Official Form 119)

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ebtor Joseph	D.	Lanza	Case number (if
First Name	Middle Name	Last Name	known)
2: List Your Unexpire	ed Personal Property Leas	es	
mation below. Do not list		l leases are leases that are	ntracts and Unexpired Leases (Official Form 106G), filt in the still in effect; the lease period has not yet ended. You may .C. § 365(p)(2}.
Describe your unexpired	personal property leases		Will the lease be assumed?
Lessor ⁴ s name:			☐ No ☐ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			∏ No ∏ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			_
3: Sign Below	enement of a faffer to a fail of sea fact a mank from 5 min and from 6 min and 10 min	1118	
nder penalty of perjury, I d roperty that is subject to a		ny intention about any prop	perty of my estate that secures a debt and any personal
Signature of Debtor 1			ura Lanza Aceer a Carry re of Debtor 2
Date 2/2/2017 MM/DD/YYYY			/2/2017 /M/DD/YYYY

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

n re	Joseph D. Lanza ; Laura R. Lanza	Case No.		
_	Debtor		(If known)	
		Chapter	Chapter 7	
	DISCLOSURE OF CO	IPENSATION OF ATTORNEY	FOR DEBTOR	
1.	compensation paid to me within one year	nkr. P. 2016(b), I certify that I am the attorney for the a fore the filing of the petition in bankruptcy, or agreed debtor(s) in contemplation of or in connection with the	d to be paid to me, for services	
	For legal services, I have agreed to accept		\$600.00	
	Prior to the filing of this statement I have r	eived	\$600.00	
	Balance Due		\$0.00	
2.	The source of the compensation paid to m	was:		
	✓ Debtor	Other (specify)		
3. The source of the compensation paid to me is:				
	Debtor	Other (specify)		
4.	I have not agreed to share the above-or members and associates of my law firm	closed compensation with any other person unless t	hey are	
		ed compensation with a other person or persons who copy of the agreement, together with a list of the na- is attached.		
5.	In return for the above-disclosed fee, I have	agreed to render legal service for all aspects of the ba	nkruptcy case, including:	
6.	By agreement with the debtor(s), the above	disclosed fee does not include the following services:	:	
		CERTIFICATION		
	certify that the foregoing is a complete stator(s) in this bankruptcy proceedings.	nent of any agreement or arrangement for payment to		
	2/2/2017	/s/ Dan Springer		
	Date	Signature of Attorney		
		Springer Law		
		Name of law firm		

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Lanza, Joseph D. ; Lanza, Laura R.	Case No	
-	Debtor(s)		
		Chapter.	Chapter7
	VERIFICA	TION OF CREDITOR MAT	RIX
TT nowledge	ne above named Debtors hereby verify the.	nat the attached list of creditors is tru	ue and correct to the best of their
ate:	2/2/2017	/s/ Lanza, Joseph Lanza, Joseph D.	· //////
		Signature of Debi /s/ Lanza, Laura F Lanza, Laura R. Signature of Join:	R. Laura Hamz

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Debtor 1 Joseph	D. Middle Name	Lanza Last Name	Case number (#	known)	
T Hat Notice	MIDDIENAME	Last Warre	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8. Unemployment compensation not enter the amount if younder the Social Security Act.	ou contend that the amount re	eceived was a benefit	\$0.00	\$0.00	
For you For your spouse	,	\$0.00 \$0.00			
9.Pension or retirement inco	-	int received that was	\$0.00	\$0.00	
payments received as a victim	rces not listed above. Specificenefits received under the Solor of a war crime, a crime again orism. If necessary, list other s	cial Security Act or st humanity, or			Total of the parameters and the
Total amounts from separate	pages, if any.		+\$0.00	+\$0.00	
11. Calculate your total curre each column. Then add the total	ent monthly income. Add line	ŭ	(\$1,418.22)	\$ <u>171.13</u>	(\$1,247.09)
Part 2: Determine Whethe	r the Means Test Applie	s to You			Total current monthly income
12. Calculate your current mor	· -	ollow these steps:	_		
12a. Copy your total current n			Сор	y line 11 here →	(\$1,247.09)
Multiply by 12 (the num 12b. The result is your annual	ber of months in a year). income for this part of the fo	m.		12b.	X 12 (\$14,965.08)
13 Calculate the median family	y Income that applies to yo	u. Follow these steps:			
Fill in the state in which you li	/e.	Illinois			
Fill in the number of people in	your household.	2			
Fill in the median family incom household.	e for your state and size of			1:	3. <u>\$65,659.00</u>
To find a list of applicable med instructions for this form. This 14. How do the lines compare?	list may also be available at the				-
14a. Line 12b is less than Go to Part 3.	or equal to line 13. On the to	op of page 1, check box	x 1, There is no presumption	of abuse.	
14b. Line 12b is more that Go to Part 3 and fill	an line 13. On the top of page out Form 122A-2.	e 1, check box 2, The p	resumption of abuse is deter	mined by Form 122A-2.	
Part 3: Sign Below					
By signing here, I declare und	der penalty of perjury that the	information on this stat	ement and in any attachment	ts is true and correct.	
/s/ Joseph Lanza	2000	<u>,</u>	/s/ Laura Lanza	na Lamy	
Date 2/2/2017 MM/DD/YYYY			Date 2/2/2017 MM/DD/YYYY		
	NOT fill out or file Form 122, out Form 122A-2 and file it v		,		

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Debtor 1 Joseph First Name	D. Middle Name	Lanza Last Name	Case number (f known)		
Part 6: Answer These Qu	estions for Reporting Purpose	es			
16. What kind of debts do you have?	"incurred by an individu No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril	al primarily for a particular and the second	ersonal, family, or househo Pausiness debts are debts bugh the operation of the b	that you incurred to obtain business or investment.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	er 7. Do you estimate		erty is excluded and administrative creditors?	
18. How many creditors do you estimate that you owe?	✓ 1-49✓ 50-99✓ 100-199✓ 200-999		5,000 10,000 -25,000	25,001-50,000 50,001-100,000 More than 100,000	
^{19.} How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	9,001-\$10 million 90,001-\$50 million 90,001-\$100 million 900,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
^{20.} How much do you estimate your liabilities to be?	☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,00 \$50,00	1,001-\$10 million 10,001-\$50 million 10,001-\$100 million 100,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below			6 7 2 0 11		
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 1 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Joseph Lanza Signature of Debtor 1 Executed on 2/2/2017		/s/ Laura Lar Signature of De		
		D/YYYY	Executed on	MM / DD / YYYY	

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Debtor 1 Joseph	D.	Lanza	Case number (#	known)				
First Name	Middle Name	Last Name		which the content of				
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the				
if you are not	debtor(s) the notice requ	uired by 11 U.S.C. § 3	42(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I				
represented by an	have no knowledge afte	nave no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
attorney, you do not need to file this page.	/s/ Dan Springer Signature of Attorney	for Debtor	Date	2/2/2017 IM / DD / YYYY				
	Dan Springer Printed name							
	Springer Law							
	Firm name							
	2222 E State St.							
	Street							
	# 107							
	Rockford		Illinois	61104				
	Gity		State	Zip Code				
	Contact phone	8155707016	Email address	dspringerlaw@gmail.com				
			Illinois					
SACO SS B versuan 22 trans i i Saco SS base Madria price de la proposa principa de versos en territorio de la	Bar number	and a topology to the facility of the facility of the facility of the facility appendix on the facility of the	State	er Roger (d. 1945) bet die er werde geweren der				
NAME AND PARTIES OF THE PROPERTY OF THE PARTIES OF	······································		and the second s					

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Joseph	D.	Lanza	
	First Name	Middle Name	Last Name	
Debtor 2	Laura	R.	Lanza	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
Case number (If known)			(State)	

	Check if	this	is	an
_	amende	d filii	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$112,869.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$64,265.30
1c. Copy line 63, Total of all property on Schedule A/B	\$177,134.30
rt 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount of Claim, at the bottom of the last page of Part 1 of Schedule Column A, Amount O, Claim, at the bottom O, C	lule D \$165,800.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$40,012.24
Your total liab	\$205,812.24
rt 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	(\$955.83)
Copy your combined monthly income from line 12 of Schedule I	<u></u>
Schedule J: Your Expenses (Official Form 106J)	\$2,113.99
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	

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Deb	otor 1 Joseph	D.	Lanza	Case number (if known)						
	First Name	Middle Name	Last Name							
Part	4: Answer These Qu	estions for Administra	tive and Statistical Records	S						
6. A	Are you filing for bankrupt	cy under Chapters 7, 11, o	or 13?							
[No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	Yes.									
7. V	7. What kind of debt do you have?									
[Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.									
		imarily consumer debts. You ith your other schedules.	ou have nothing to report on this	part of the form. Check this box and su	ubmit					
		our Current Monthly Incom Form 122B Line 11; OR, Fo	ne: Copy your total current month orm 122C-1 Line 14.	lly income from Official	(\$1,247.09)					
9.	Copy the following spec	ial categories of claims fro	om Part 4, line 6 of Schedule E	/F:						
	From Part 4 on Schedul	e E/F, copy the following:	Total claim							
	9a. Domestic support obli	igations (Copy line 6a.)		\$0.00						
	9b. Taxes and certain other	er debts you owe the govern	ment. (Copy line 6b.)	\$0.00						
	9c. Claims for death or pe	ersonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy	line 6f.)		\$30,051.43						
	9e. Obligations arising our priority claims. (Copy line		or divorce that you did not report	as \$0.00	_					
	9f. Debts to pension or pr	rofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00						

\$30,051.43

9g. Total. Add lines 9a through 9f.

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<u>Schedu</u>	le A/B: Property			ore than one category, list t	12/1
	orm 106A/B				amended filing
Case number (If known)					Check if this is an
Casa number			(State)		
United States I	Bankruptcy Court for the: Northern	1	District of Illinois		
(Spouse, if filing)	First Name	Middle Name	Last Name		
Debtor 2	Laura	R.	Lanza		
	First Name	Middle Name	Last Name		
Debtor 1	Joseph	D.	Lanza		

responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2 Yes. Where is the property? **V** What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.1 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building 7808 East Brick School Current value of the Current value of the Road Condominium or cooperative entire property? portion you own? Number Street Manufactured or mobile home \$112869.00 \$112869.00 Land Illinois 61070 Rock City Describe the nature of your ownership Investment property City State Zip Code interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. Stephenson Other County Check if this is community property Who has an interest in the property? Check (see instructions) one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.2 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. City State Zip Code Other Check if this is community property Who has an interest in the property? Check (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Joseph	D.	Lanza Case num	ber (if known)	
Debtor 1	First Name	Middle Name	Last Name		
2. Add you ha wart 2:	the dollar value of the pove attached for Part 1. W Describe Your Vehicle In the dollar value of the pove attached for Part 1. W Describe Your Vehicle In the the dollar value of the pove attached for Part 1. W	zip Code Zip Code ortion you own for frite that number I	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter property identification number: all of your entries from Part 1, including any entriese. st in any vehicles, whether they are registered or also report it on Schedule G: Executory Contracts and	the amount of any sec Creditors Who Have C Current value of the entire property? Describe the nature interest (such as fee the entireties, or a li Check if this is of (see instructions) m, such as local ies for pages \$1	simple, tenancy by fe estate), if known. community property s)
3.1	Make Model: Year:	Volkswagen Jetta 2001	Who has an interest in the property? Check one. Debtor 1 only	the amount of any se	ed claims or exemptions. Put cured claims on <i>Schedule D</i> Claims Secured by Property.
	Approximate mileage: Other information:	443000	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Current value of the entire property? \$500.00	
3.2	Make Model: Year: Approximate mileage: Other information:	Ford F250 1999 190000	The check it this is community property (see instructions) Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any se	ed claims or exemptions. Purcured claims on <i>Schedule Eclaims Secured by Property</i> . Current value of the portion you own? \$1350.00
			Check if this is community property (see instructions)		

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Debtor 1	Joseph First Name	D. Middle Name	Lanza Last Name	Case number	r (if known)	
3.3	Make Model: Year: Approximate mileage: Other information: Does not run, in pieces	Ford F350 2001	Who has an interest in thone. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 ☐ At least one of the deb	only tors and another	the amount of any secu	claims or exemptions. Put red claims on Schedule D: hims Secured by Property. Current value of the portion you own? \$300.00
3.4	Make Model: Year: Approximate mileage:	Rambler American 1965	Check if this is comminstructions) Who has an interest in thone. Debtor 1 only		Do not deduct secured claims or exemptions the amount of any secured claims on Schea Creditors Who Have Claims Secured by Prop	
	Other information: Disassembled		Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb	•	Current value of the entire property? \$500.00	Current value of the portion you own? \$500.00
	nples: Boats, trailers, motor No Yes		instructions) r recreational vehicles, oth fishing vessels, snowmobile Who has an interest in th one.	s, motorcycle accessorie	Do not deduct secured	claims or exemptions. Put red claims on <i>Schedule D:</i>
	Year: Approximate mileage: Other information:		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this is comminstructions)	tors and another		Current value of the portion you own?
4.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in thone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this is comminstructions)	only tors and another	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	-	-	of your entries from Part 2			842.50

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Debtor 1 Joseph D. Lanza Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Bedroom Set, Living Room Set, Kitchen Appliances, Washer & Dryer \$1200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music No Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... Ruger \$200.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Wedding Ring \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 3 Horses, 4 Dogs, 2 Cats \$2000.00 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3850.00 for Part 3. Write that number here

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D. Lanza Debtor 1 Joseph Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Debt	tor 1 Joseph First Name	D. Middle Name	Lanza Last Name	Case number (if known)	
20.	Government and corpo	orate bonds and other negotia	ble and non-negotiable		
	Non-negotiable instrume	ents are those you cannot transf	er to someone by signing	or delivering them.	
	✓ No Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension				-
	_	RA, ERISA, Keogh, 401(k), 403(k	o), thrift savings accounts,	or other pension or profit-sharing plans	
	No ✓ Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:	American Funds		\$277.57
		IRA:	American Funds		\$3655.23
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so tha with landlords, prepaid rent, publ			
	✓ No		Institution name:		
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			. —
		Telephone:			. —
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money t	o you, either for life or for	a number of years)	
	✓ No Yes	Issuer name and description:			
		-			

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Debto	r 1 Joseph	D.	Lanza	Case number (if known)	
0.4	First Name	Middle Name	Last Name	dan a marifi ad akaka kaiki an maraman	
24.		n education IRA, in an account 530(b)(1), 529A(b), and 529(b)(1).		der a qualified state tuition program.	
	√ No				
	Yes	rests.11 U.S.C. § 521(c):			
25.	Trusts, equit	able or future interests in prope	rty (other than anything listed in li	ne 1), and rights or powers	
		or your benefit		, , ,	
	✓ No				
	Yes. Desc	ribe			
26.	Patents, cop	yrights, trademarks, trade secre	ets, and other intellectual property	,	
	Examples: Into	ernet domain names, websites, pro	oceeds from royalties and licensing ag	reements	
	✓ No				
	Yes. Desc	ribe			
27.		nchises, and other general inta	=	Paragraphy of the standard Paragraphy	
		iding permits, exclusive licenses, c	cooperative association holdings, liquo	or licenses, professional licenses	
	✓ No Yes. Desc	riho			
	L Tes. Desc	IIDE			
Mon	ey or prope	ty owed to you?			Current value of the
Mone	ey or prope	ty owed to you?			portion you own?
	ey or prope Tax refunds o				portion you own? Do not deduct secured
	Tax refunds o	wed to you		Fadani	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds o			Federal:	portion you own? Do not deduct secured
	Tax refunds of ✓ No — Yes. Give about	epecific information t them, including whether already filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds of ✓ No — Yes. Give about	wed to you specific information t them, including whether			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds of No Yes. Give about your and from the support	specific information t them, including whether already filed the returns he tax years		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	No Yes. Give about you and and a	specific information t them, including whether already filed the returns he tax years	sal support, child support, maintenanc	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds of No Yes. Give about your and free family support Examples: Pass	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	sal support, child support, maintenanc	State: Local: ce, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds of ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns he tax years	eal support, child support, maintenanc	State: Local: ce, divorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds of ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	sal support, child support, maintenanc	State: Local: ce, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds of ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	sal support, child support, maintenanc	State: Local: ce, divorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds of ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	sal support, child support, maintenanc	State: Local: ce, divorce settlement, property settlementh Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00
28.	Tax refunds of ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	eal support, child support, maintenanc	State: Local: De, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Family suppor Examples: Pasi Yes. Give:	specific information t them, including whether already filed the returns the tax years t due or lump sum alimony, spous	sal support, child support, maintenanc	State: Local: De, divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds or ✓ No Yes. Give about your and the support of the	specific information t them, including whether already filed the returns he tax years	/ments, disability benefits, sick pay, να	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	No Yes. Give about your and	specific information t them, including whether already filed the returns he tax years	/ments, disability benefits, sick pay, να	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	No Yes. Give: about your and framily support Examples: Past Yes. Give: No Other amount Examples: Unp	specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spous specific information s someone owes you aid wages, disability insurance pay ial Security benefits; unpaid loans	/ments, disability benefits, sick pay, να	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	No Yes. Give about your and	specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spous specific information s someone owes you aid wages, disability insurance pay ial Security benefits; unpaid loans	/ments, disability benefits, sick pay, να	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Joseph	D.	Lanza	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, disa		alth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	No ✓ Yes. Name the ins	surance company	Company name:	Beneficiary:	Surrender or refund value
	of each policy and		Country Financial	Spouse - Term policy	\$0.00
32.	Any interest in prope	erty that is due you from	someone who has died		_
	If you are the beneficial property because some		proceeds from a life insurance polic	cy, or are currently entitled to receive	
	No No Describe				1
	Yes. Describe				
33.			you have filed a lawsuit or made	a demand for payment	
	No No	empioyment disputes, insi	urance claims, or rights to sue		
	Yes. Describe				
34.	Other contingent an to set off claims	d unliquidated claims of	every nature, including counter	claims of the debtor and rights	
	✓ No Yes. Describe				1
	Tes. Describe				
35.	Any financial assets	you did not already list			
	No No Doscribo				1
	Yes. Describe				
36.	Add the dollar value	of all of your entries from	m Part 4, including any entries fo	or pages you have attached	
			,,,,,,,,		\$3932.80
Part				nterest In. List any real estate in Pa	rt 1.
37.	No. Go to Part 6.	any legal or equitable in	terest in any business-related pr	орепу?	Current value of the
	Yes. Go to line 38	J.			portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable	or commissions you alr	eady earned		or everibinous
	No No Describe				1
	Yes. Describe				
39.		rnishings, and supplies elated computers, software	e, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, ele	ectronic devices
	No				
	Yes. Describe	Laptop Computer, Laser	Printer		
	\$140.00				

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Deb	tor 1 Joseph	D.	Lanza	Case number (if known)	
40	First Name	Middle Name	Last Name		
40.	Machinery, fixtures,	equipment, supplies you	use in business, and tools of	your trade	
	✓ No				
	Yes. Describe				
11	Inventory				
41.					
	✓ No				
	Yes. Describe				
42	Interests in partners	hins or joint ventures			
			Name of entity:	% of ownership:	
	Yes. Give specific information about		•		
	them		-		
					<u></u> -
43 (Customer lists, mailin	g lists, or other compila	tions	-	
	—	g			
	✓ No				
	Yes. Do your lists	include personally identifia	able information (as defined in 11	U.S.C. § 101(41A))?	
	☐ No				
	Yes. Des	cribe			
	Ш				
44.	Any business-related	l property you did not al	ready list		
	No		100% ownership of Mourik En	terprises LLC (LLC is not operating and has bee	n \$46500.00
	Yes. Give specific			ft. Flatbed Trailer, 1972 City Dump Trailer, 1997	
	information		Peterbilt 378, 1998 Internation	al, German American State Bank Savings &	
			Checking Accounts German Ar assets will be surrendered to th	nerican Bank has lien on all LLC assets and all	
			assets will be sufferidence to the	o secured fortact	_
					_
					<u></u>
					-
45 A	dd the dollar value of	all of your entries from	Part 5, including any entries fo	or nages you have attached	
					\$46640.00
<u> </u>				,	Ψ.00.0.00
Part		arm- and Commerci		ty You Own or Have an Interest In.	
	•				
46.	Do you own or have	any legal or equitable in	terest in any farm- or comme		
	No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47	' .			Do not deduct secured claims
					or exemptions
47.	Farm animals	acultar form raised field			
	<i>Examples:</i> Livestock, ∣	ooultry, farm-raised fish			
	✓ No				
	Yes. Describe				
	-				

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Debi	tor 1 Joseph		nnza	Case number (if known)	
40	First Name		st Name		
48.	Crops-either growing of	or harvested			
	✓ No				
	Yes. Describe				
	_				
40	Form and fishing aguin	ment implements machinery fixture	s and tools of trade		
49.	—	ment, implements, machinery, fixture	s, and tools of trade		
	✓ No				
	Yes. Describe				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	✓ No				
	Yes. Describe				
	Tes. Bescribe				
				<u>'</u>	
51.	Any farm- and commer	cial fishing-related property you did n	ot already list		
	✓ No				
	Yes. Describe				
	_				
				Г	
		of your entries from Part 6, including			
for Pa ▶	art 6. Write that number	here			
Part	Describe All Pro	perty You Own or Have an Interes	st in That You Did No	t List Δhove	
		perty of any kind you did not already lis		e Liot / 18070	
55.		s, country club membership	ot:		
	□ No				
		Timeshare with Global Exchange Vacatio	n Club		\$0.00
	information				
54. A	dd the dollar value of all	of your entries from Part 7. Write tha	t number here		•
		•			
Part	List the Totals of	Each Part of this Form			, , , , , , , , , , , , , , , , , , ,
55. I	Part 1: Total real estate.	, line 2		>	\$112869.00
56. r	oart 2 total vehicles, line	e 5	\$9842.50		
57. P	art 3: Total personal an	d household items, line 15			
	-		\$3850.00		
	art 4: Total financial as:		\$3932.80		
59. i	Part 5: Total business-re	elated property, line 45	\$46640.00		
60. I	Part 6: Total farm- and fi	ishing-related property, line 52			
61. I	Part 7: Total other prope	erty not listed, line 54			
62 7	Total personal property	Add lines 56 through 61.			
٠.١	. J.a. pordonar property.	. aa mioo oo anougii o i	\$64265.30	Copy personal property total	+ \$64265.30
				copy possessial property total P	
					\$177134.30
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			

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Debtor 1	Joseph	D.	Lanza	Case number (if known)	
	First Name	Middle Name	Last Name		

Schedule A/B: Property. Additional page

Part 2:	Describe Your Vehic	es			
3.5	Make Model: Year: Approximate mileage: Other information:	Harley- Davidson 883 2009	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$2192.50
3.6	Make Model: Year: Approximate mileage: Other information:	Horse Trailer	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$1000.00
3.7	Make Model: Year: Approximate mileage: Other information:	Ford 650 2003	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$4000.00

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Fill in this information to identify your case:					
Debtor 1	Joseph	D.	Lanza		
	First Name	Middle Name	Last Name		
Debtor 2	Laura	R.	Lanza		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
			(State)		
Case number (If known)	-				

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	tt 1: Identify the Property You Clair	m as Exempt						
1.	1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.							
	You are claiming state and federal	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)					
	You are claiming federal exemption	ns. 11 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A	A/B that you claim as e	xempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: 7808 East Brick School Road , Rock City, IL 61070 Line from Schedule A/B: 01	\$112,869.00	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901				
	Brief description: IRA, American Funds Line from Schedule A/B: 21	\$277.57	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006				
3.	✓ No	rery 3 years after that for	375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case?					

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Debtor 1 Joseph D. Lanza Case number (if known)
First Name Middle Name Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description:	\$3,655.23	П	735 ILCS 5/12-1006
IRA, American Funds	Ψ0,000.20		_
Line from Schedule A/B: 21		100% of fair market value, up to any applicable statutory limit	
Brief description:	Unknown		735 ILCS 5/12-1001(b)
Timeshare with Global		\$0	_
Exchange Vacation Club Line from Schedule A/B: 53		100% of fair market value, up to any applicable statutory limit	
Brief			735 ILCS 5/12-1001(b)
description:	\$500.00	\$500.00	
Volkswagen Jetta, 2001 Line from Schedule A/B: 03		100% of fair market value, up to any applicable statutory limit	_
Brief			735 ILCS 5/12-1001(b)
description: Ford F250, 1999	\$1,350.00	\$1,350.00	_
Line from Schedule A/B: 03		100% of fair market value, up to any applicable statutory limit	
Brief			735 ILCS 5/12-1001(b)
description: Ford F350, 2001, Does	\$300.00	\$300.00	
not run, in pieces Line from		100% of fair market value, up to any applicable statutory limit	_
Schedule A/B: 03 Brief			735 ILCS 5/12-1001(b)
description:	\$500.00	\$500.00	733 1EGG 3/12-1001(b)
Rambler American, 1965, Disassembled		100% of fair market value, up to any	_
Line from Schedule A/B: 03		applicable statutory limit	
Brief	\$2,192.50		735 ILCS 5/12-1001(c)
description: Harley-Davidson 883,	\$2,192.50	\$2,400.00	_
2009		100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 03		оррания от технология	
Brief description:	Unknown		735 ILCS 5/12-1001(b)
Cash		\$0	_
Line from Schedule A/B:16		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$1,200.00		735 ILCS 5/12-1001(b)
Bedroom Set, Living		\$1,200.00	_
Room Set, Kitchen Appliances, Washer & Dryer		100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 06			
Brief description:	\$300.00		735 ILCS 5/12-1001(a)
Used Clothing		\$300.00	_
Line from Schedule A/B: 11		100% of fair market value, up to any applicable statutory limit	
দিটার্লা Form 106C description:	Schedule C: \$150.00	The Property You Claim as Exempt	735 ILCS 5/12-1 ეცქ ტე
		\$150.00	

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Wedding Rin	g		Document Page 32 of 76 pp to any	
Debtore from ph_		D.	Lanza applicable statutory-lingt number (if known)	
Scheorus Marie	12	Middle Name	Last Name	•

Brief description of the property and	Current value of	Amount of the exemption you claim	Specific laws that allow exemption
line on Schedule A/B that lists this property	the portion you own	Check only one box for each exemption.	
	Copy the value from Schedule A/B		
Brief	\$200.00	_	735 ILCS 5/12-1001(b)
description: Ruger	φ200.00	\$200.00	
Line from Schedule A/B: 10		100% of fair market value, up to any applicable statutory limit	_
Brief	\$140.00		735 ILCS 5/12-1001(d)
description: Laptop Computer, Laser	<u> </u>	\$140.00	
Printer		100% of fair market value, up to any applicable statutory limit	_
Line from Schedule A/B: 39		applicable statutery limit	
Brief	Фо ооо оо		735 ILCS 5/12-1001(b)
description: 3 Horses, 4 Dogs, 2 Cats	\$2,000.00	\$1,200.00	
Line from		100% of fair market value, up to any	_
Schedule A/B: 13		applicable statutory limit	
Brief			735 ILCS 5/12-1001(b)
description:	\$1,000.00	\$1,000.00	
Horse Trailer Line from		100% of fair market value, up to any	_
Schedule A/B:03		applicable statutory limit	
Brief			735 ILCS 5/12-1001(c); 735 ILCS
description:	\$4,000.00	\$2,400.00; \$1,600.00	5/12-1001(b)
Ford 650, 2003 Line from		100% of fair market value, up to any	_
Schedule A/B: 03		applicable statutory limit	
Brief	#0.00	_	735 ILCS 5/12-1001(f)
description:	\$0.00	₹	
Country Financial Line from		100% of fair market value, up to any	_
Schedule A/B: 31		applicable statutory limit	

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		Document 1 age 33 of 1	O		
Fill in	this information to identify your ca	ise:			
Debto	or 1 Joseph	D. Lanza			
	First Name	Middle Name Last Name			
Debto	or 2 Laura se, if filing) First Name	R. Lanza Middle Name Last Name			
	The Hame				
Unite	d States Bankruptcy Court for the:	Northern District of Illinois (State)			
Case (If know	number				
	•			П	Check if this is a
	icial Form 106D				mended filing
Sc	hedule D: Credite	ors Who Have Claims Secure	ed by Prop	erty	12/1
		ole. If two married people are filing together, both are equa			
	space is needed, copy the Addition and case number (if known).	onal Page, fill it out, number the entries, and attach it to t	his form. On the top	of any additional pag	es, write your
	Do any creditors have claims se	ecured by your property?			
	No. Check this box and subm	nit this form to the court with your other schedules. You hav	e nothing else to rep	ort on this form.	
i	Yes. Fill in all of the information	n below.			
Part					
2.		tor has more than one secured claim, list the creditor	Column A	Column B	Column C
	separately for each claim. If more th	nan one creditor has a particular claim, list the other creditors	Amount of claim	Value of	Unsecured
	in Part 2. As much as possible, list name.	the claims in alphabetical order according to the creditor's	Do not deduct the value of collateral.	collateral that supports	portion If any
			value of collateral.	this claim	II ally
2.1	First National Bank and Trust	Describe the property that secures the claim:	\$104,800.00	\$112,869.00	\$0.00
	Creditor's Name 345 E Grand Ave	Mortgage - 7808 East Brick School Road			
	Number Street	As of the date you file, the claim is: Check all that apply.			
	Attn: Bankruptcy Dept.	Contingent			
	BELOIT WI 53511 City State ZIP Code	Unliquidated			
	Who owes the debt? Check one.	Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)			
	Date debt was 12/21/2012	Last 4 digits of account number			
	incurred			•	
2.2	German American State Bank Creditor's Name	Describe the property that secures the claim:	\$61,000.00	\$46,500.00	<u>\$14,500.0</u> 0
	100 Church Street Number Street	Business Loan As of the date you file, the claim is: Check all that apply.			
	Number Street	Contingent			
	GERMAN	Unliquidated			
	VALLEY IL 61039 City State ZIP Code	Disputed			
	City State ZIP Code Who owes the debt? Check one.	Nature of lien. Check all that apply			
	Debtor 1 only	✓ An agreement you made (such as mortgage or secured			
	Debtor 2 only	car loan)			
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the debtors and another	Judgment lien from a lawsuit			
	Check if this claim relates	Other (including a right to offset)			
	to a community debt Date debt was	Last 4 digits of account number			
	incurred		•		
	Add the dollar value of y	your entries in Column A on this page. Write that number	\$165,800.00		

here:

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Joseph	D.	Lanza
	First Name	Middle Name	Last Name
Debtor 2	Laura	R.	Lanza
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Northern	District of Illinois (State)
Case number (If known)			ζ

Official Form 106E/F

Che	ck if th	is is a	n amen	ded filina

claim

amount

amount

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:	List All of	Your PRIORIT	Y Unsecured	Claims
---------	-------------	--------------	-------------	---------------

1.	Do any creditors have priority unsecured claims against you?			
	No. Go to Part 2.			
	Yes.			
2.	List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor sep listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two prince Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)	both priority	and nonprior	ity amounts.
		T-4-1	Duianito	Niamanianian

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Debtor 1 Joseph D. Lanza Case number (if known) Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 AES/ESA \$7,334.45 Last 4 digits of account number Nonpriority Creditor's Name PO Box 61047 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated HARRISBURG 17106 Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only $\overline{\mathbf{A}}$ Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? Yes Capital One Bank USA NA 4.2 \$775.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 30281 Street Number As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated 84130 SALT LAKE CITY Utah City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt NOn Other. Specify ___ Is the claim subject to offset? **✓** No Yes 4.3 Capital One Bank USA NA \$677.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 30281 As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated SALT LAKE CITY 84130 Utah City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans $\overline{\mathbf{A}}$ Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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D. Debtor 1 Joseph Lanza Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Chase Bank USA \$1,701.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 15298 Number As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated WILMINGTON 19850 Delaware City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only **V** divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Non Is the claim subject to offset? **✓** No T Yes Chase Bank USA \$1,207.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated WILMINGTON Delaware 19850 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only $\overline{}$ Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Is the claim subject to offset? **✓** No Yes 4.6 Discover Financial Services \$3,361.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 15316 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated WILMINGTON 19850 Delaware Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only **V** Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _

✓ No ✓ Yes

Is the claim subject to offset?

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D. Debtor 1 Joseph Lanza Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Federal Loan Servicing Credit \$22,716.98 - Last 4 digits of account number Nonpriority Creditor's Name PO Box 60610 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated **HARRISBURG** 17106 Pennsylvania City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No T Yes Freeport Health Network \$264.00 4.8 Last 4 digits of account number ___ Nonpriority Creditor's Name When was the debt incurred? 10 West Linden Street n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated FREEPORT Illinois 61032 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Is the claim subject to offset? **✓** No Yes Presta Loan Servicing 4.9 \$1,027.50 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 737 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent 61264 Milan Illinois Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

✓ No Yes

Is the claim subject to offset?

Other. Specify _

n

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D. Debtor 1 Joseph Lanza Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Siepert & Co. LLP \$287.00 Last 4 digits of account number Nonpriority Creditor's Name 5302 Williams Drive When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Roscoe Illinois 61073 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? Yes 4.11 SYNCB/Old Navy DC \$50.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ORLANDO 32896 Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Non Is the claim subject to offset? **✓** No Yes US Cellular 4.12 \$611.31 - Last 4 digits of account number Nonpriority Creditor's Name 8410 W. Bryn Mawr When was the debt incurred? n/a Street As of the date you file, the claim is: Check all that apply. Attn: Bankruptcy Dept. Contingent Unliquidated 60631 CHICA Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No

Yes

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Debtor 1	Joseph First Name	D.	Idle Name	Lanza Last Name	Case ni	umber (if known)					
Part 3:	t 3: List Others to Be Notified About a Debt That You Already Listed										
5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For exam collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list to collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.											
	Diversified Adjustment Service Name		On which entry in Part 1 or Part 2 did you list the original creditor?								
	600 Coon Rapids Boulevard Number Street MINNEAPOLIS Minnesota 55432 City State Zip Code			Line 4.12	Line 4.12 of (Check one): Part 1: Creditors with Priority Part 2: Creditors with Nonprior Claims						
_				Last 4 digits of account number							

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Lanza Case number (if known)
Last Name Debtor 1 Joseph First Nam D. Middle Name

i ii st ivai	THE INTEGRAL CONTROL LESS INCLINE			
	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	statistical reporting purposes only.	28 U.S.C. §159.
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
nom ruit i	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$30,051.43	
nom Fait 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$9,960.81	
	6j. Total. Add lines 6f through 6i.	6j.	\$40,012.24	

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Fill in this infor	rmation to identify your ca	ase:		
Debtor 1	Joseph	D.	Lanza	
	First Name	Middle Name	Last Name	
Debtor 2	Laura	R.	Lanza	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number			(State)	

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Joseph	D.	Lanza	
	First Name	Middle Name	Last Name	
Debtor 2	Laura	R.	Lanza	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
			(State)	
Case number (If known)				_

П	Check if this is an
	amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

No Yes 2. Within the Idaho, Louis No. G Yes. [Yes. [isiana, Nevada, New Mexico, Pu Go to line 3. Did your spouse, former spou	n a community property s uerto Rico, Texas, Washingt	state or territory? (<i>Cor</i> ton, and Wisconsin.)	mmunity property states and territories include Arizona, California,
Yes 2. Within the Idaho, Louis No. G Yes. I	isiana, Nevada, New Mexico, Pu Go to line 3. Did your spouse, former spou	uerto Rico, Texas, Washingt	ton, and Wisconsin.)	
2. Within the Idaho, Louis No. G	isiana, Nevada, New Mexico, Pu Go to line 3. Did your spouse, former spou	uerto Rico, Texas, Washingt	ton, and Wisconsin.)	
Yes. C	Did your spouse, former spou	use, or legal equivalent liv	e with you at the time?	
		aco, o. loga. oquita.c.it	o you at a loo.	
	10			
	es. In which community state	e or territory did you live?	F	fill in the name and current address of that person.
	Name of your spouse, former	spouse, or legal equivalent		-
	Number Street			_
	City	State	Zip Code	-
again as a	codebtor only if that person	is a guarantor or cosigne	er. Make sure you have	or spouse is filing with you. List the person shown in line 2 to listed the creditor on Schedule D (Official Form 106D), to D, Schedule E/F, or Schedule G to fill out Column 2.
Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:

	Case 17-803	02 Doc 1		l 02/15/17 cument	Entered Page 43	d 02/15/17 of 76	17:04:40	Desc M	ain
Fill in this inf	ormation to identify	your case:							
Debtor 1	Joseph First Name	D. Middle I	Name	Lanza Last Nan	ne		als if this is		
Debtor 2 (Spouse, if filing)	Laura First Name	R. Middle I	Name	Lanza Last Nan	ne		ck if this is: An amended fil	ing	
United States I the: Case number (If known)	Bankruptcy Court for	Northern		_ District of Illino (Sta		- -	A supplement sexpenses as of	the following	petition chapter 13 date:
Official I	orm 106I								
Schedul	e I: Your In	come							12/15
Part 1: Des	cribe Employmen	t		Debtor 1			Debtor 2		
informatio If you have attach a se		Employment status Employed Not Employed					Employed Not Employed		
employers.				Sole proprietorship			Vet Tech		
Include par self-employ	t time, seasonal, or red work.	Employer's name	е	Mavrik Enter	orises LLC		Animal Emerg	gency Clinic of	Rockford
	may include student lker, if it applies.			7808 East Brick School Road Number Street			4236 Maray Drive Number Street		
				Rock City	Illinois	61070	Rockford	Illinois	61107
				City	State	Zip Code	City	State	Zip Code
		How long emplo there?	yed						
Part 2: Giv	e Details About M	lonthly Incom	е						
Estimate mo	nthly income as of t	he date you file t	this form	n. If you have no	othing to repo	ort for any line, v	vrite \$0 in the s	oace. Include	your non-filing

spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would For Debtor 1 non-filing spouse \$0.00 \$539.63

3. Estimate and list monthly overtime pay.

+ \$0.00 \$0.00

+ \$0.00 \$539.63

For Debtor 2 or

4. Calculate gross income. Add line 2 + line 3.

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Debto	r 1Joseph First Name	D. Middle Name	Lanza Last Name	Case numbe	er (if			
	riist Name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse			
Cop	y line 4 here		→ 4.	\$0.00	\$539.63			
	all payroll deduction							
5a.	Tax, Medicare, and	Social Security deductions	5a.	\$0.00	\$77.24			
5b.	Mandatory contrib	utions for retirement plans	5b.	\$0.00	\$0.00			
5c.	Voluntary contribu	tions for retirement plans	5c.	\$0.00	\$0.00			
5d.	Required repayme	nts of retirement fund loans	5d.	\$0.00	\$0.00			
5e.	Insurance		5e.	\$0.00	\$0.00			
5f. I	Domestic support o	bbligations	5f.	\$0.00	\$0.00			
5g.	Union dues		5g.	\$0.00	\$0.00			
5h.	Other deductions.	Specify:	5h. +	\$0.00 +	\$0.00			
6. Add +5h.	the payroll deduct	ions. Add lines 5a + 5b + 5c + 5d + 5e +5	of + 5g 6.	\$0.00	\$77.24			
7. Calc	ulate total monthl	y take-home pay. Subtract line 6 from lin	e 4. 7.	\$0.00	\$462.39			
8. List	all other income re	egularly received:						
	business, professio							
		or each property and business showing ary and necessary business expenses, and t income.	d 8a.	(\$1,418.22)	\$0.00			
8b.	Interest and divide	ends	8b.	\$0.00	\$0.00			
	Family support pay dependent regular	ments that you, a non-filing spouse, or ly receive	а					
		ousal support, child support, maintenance and property settlement.	, 8c.	\$0.00	\$0.00			
8d.	Unemployment co	mpensation	8d.	\$0.00	\$0.00			
8e.	Social Security		8e.	\$0.00	\$0.00			
 	nclude cash assistar cash assistance that	assistance that you regularly receive nce and the value (if known) of any non-you receive, such as food stamps (benefit ntal Nutrition Assistance Program) or	s 8f.	\$0.00	\$0.00			
8g.	Pension or retirem	ent income	8g.	\$0.00	\$0.00			
8h.	Other monthly inc	ome. Specify:	8h. +	\$0.00 +	\$0.00			
9. Add	all other income A	dd lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9.	(\$1,418.22)	\$0.00			
		ome. Add line 7 + line 9.) for Debtor 1 and Debtor 2 or non-filing s	10. pouse	(\$1,418.22)	\$462.39	= [(\$955.83)	
Incl frien	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.							
Spe	cify:					11. +	\$0.00	
		e last column of line 10 to the amount e Summary of Schedules and Statistical Si				12.	(\$955.83)	
74.10		2. Solication and Stationical Of			,	l	Combined monthly income	
13. Do	you expect an inci	rease or decrease within the year after	you file this for	m?			,	
	•						_	

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Debtor 1	Joseph	D.	Lanza	Case number (if
	First Name	Middle Name	Last Name	known)

Official Form 106l. Additional page.

8a.Net income from rental property and from operating a business, profession, or farm

8a.1 Mavrik Enterprises LLC	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$4,274.47	
Ordinary and necessary operating expenses	-\$5,692.69	
Net monthly income from a business, profession, or farm	(\$1,418.22)	

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Fill in this infor	mation to identify your o	case:		
Debtor 1	Joseph First Name	D. Middle Name	Lanza Last Name	
Debtor 2	Laura	R.	Lanza	Check if this is: An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	l ≝
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement showing post-petition chapter 1 expenses as of the following date:
Case number (If known)			(,	MM / DD / YYYY
Official	Form 106.I			

Official Forth 1065

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number

(if known). Answer every question.						
Part 1: Describe Your Household						
1. Is this a joint case?						
No. Go to line 2						
Yes. Does Debtor 2 live in a separate household?	?					
No						
Yes. Debtor 2 must file Official Forms 106	3J-2, Expenses for Separate Household of Debt	tor 2.				
2. Do you have dependents? No						
Do not list Debtor 1 and Debtor 2. Yes. Fill out this inform each dependent	nation for Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does depen with you?	dent live		
3. Do your expenses include expenses of people other than yourself and your dependents?						
Part 2: Estimate Your Ongoing Monthly Expense	9S					
Estimate your expenses as of your bankruptcy filing dat expenses as of a date after the bankruptcy is filed. If th applicable date.						
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form B 106I.) Your expenses						
4. The rental or home ownership expenses for your res any rent for the ground or lot. 4.		4.	\$921.00			
If not included in line 4:						
4a. Real estate taxes		4a	\$0.00			
4b. Property, homeowner's, or renter's insurance			4b.	\$0.00		
4c. Home maintenance, repair, and upkeep expenses			4c.	\$0.00		
4d. Homeowner's association or condominium dues		4d.	\$0.00			

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First Name Middle Name Last Name		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$200.00
6b. Water, sewer, garbage collection	6b.	\$45.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$304.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$400.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$0.00
10. Personal care products and services	10.	\$0.00
11. Medical and dental expenses	11.	\$0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$0.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$9.99
14. Charitable contributions and religious donations	14.	\$0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a	\$117.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$117.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as dedu		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you. Specify:		\$0.00
20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses.	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

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Debtor 1			D.	Lanza	Case number (if known)		
	First Na	me	Middle Name	Last Name			
21. Othe	r. Spec	ify:		_		21	\$0.00
22. Calc	ulate y	our monthly expenses.					\$2,113.99
22a. /	Add line	es 4 through 21.		\$0.00			
		ne 22 (monthly expenses	2		\$2,113.99		
		22a and 22b. The result				22.	Ψ2,110.93
23.Calcu	ulate y	our monthly net income	·.				
23a.	Copy lir	ne 12 (your combined mo	onthly income) from	Schedule I.		23a	(\$955.83)
23b.	Сору у	our monthly expenses fro	m line 22 above.			23b	\$2,113.99
		t your monthly expenses		ncome.			(\$3,069.82)
	The res	ult is your monthly net in	come.			23c	
For more	exampl	e, do you expect to finish	paying for your car	ses within the year after loan within the year or do y modification to the terms o	ou expect your		

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D.	Lanza	
Mistalla Nassa		
Middle Name	Last Name	Check if this is:
R.	Lanza	
Middle Name	Last Name	An amended filing
ourt for the: Northern	District of Illinois (State)	A supplement showing post-petition chapter expenses as of the following date:
	(2.5.5)	
		MM / DD / YYYY
	e Middle Name	Sourt for the: Northern District of Illinois (State)

Part 1: Describe Your Household

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.Do you and Debtor 1 maint	ain separate households?						
No. Do not complete this form.							
	is ioiii.						
✓ Yes.							
2. Do you have dependents?	✓ No						
Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2		es dependent live th you?			
Only list dependents							
Do not state the dependents' names.							
3. Do your expenses include expenses of people other than yourself and your dependents?	✓ No Yes						
Part 2: Estimate Your Or	ngoing Monthly Expenses						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.							
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) Your expenses							
	4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4.						
If not included in line 4:							
4a. Real estate taxes	\$0.00						
4b. Property, homeowner's, or renter's insurance 4b.							
4c. Home maintenance, rep	air, and upkeep expenses		4c.	\$0.00			
4d. Homeowner's associati	\$0.00						

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First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural ga	as	6a.	\$0.00
6b. Water, sewer, garbage co	llection	6b.	\$0.00
6c. Telephone, cell phone, In	ternet, satellite, and cable services	6c.	\$0.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping sup	pplies	7.	\$0.00
8. Childcare and children's ed	ucation costs	8.	\$0.00
9. Clothing, laundry, and dry c	leaning	9.	\$0.00
10. Personal care products an	d services	10.	\$0.00
11. Medical and dental expens	ses	11.	\$0.00
12. Transportation. Include gas			\$0.00
Do not include car payments		12.	
	eation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions a	nd religious donations	14.	\$0.00
 Insurance. Do not include insurance ded 	lucted from your pay or included in lines 4 or 20.		
15a. Life insurance		15a	\$0.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$0.00
15d. Other insurance. Specify	<u>/:</u>	15d	\$0.00
	deducted from your pay or included in lines 4 or 20.		
Specify:		16.	\$0.00
17. Installment or lease paymo	ents:	10.	
17a. Car payments for Vehicle	e 1	17a	\$0.00
17b. Car payments for Vehicl	e 2	17b	\$0.00
17c. Other. Specify:		17c	\$0.00
		17d	\$0.00
	maintenance, and support that you did not report as deducted from		\$0.00
	ıle I, Your Income (Official Form 106I).	18.	
	to support others who do not live with you.		
Specify:		19.	\$0.00
20a. Mortgages on other pro	es not included in lines 4 or 5 of this form or on Schedule I: Your Income.	20a	\$0.00
20b. Real estate taxes 20b.	F-17	20a 20b	\$0.00 \$0.00
20c. Property, homeowner's,	or renter's insurance	200 20c	\$0.00
20d. Maintenance, repair, and		20d	\$0.00
20e. Homeowner's association			· · · · · · · · · · · · · · · · · · ·
	5. 55	20e	\$0.00

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Debtor 1 Jose First		D. Middle Name	Lanza Last Name	Case number (if known)		
21.Specify:					21	\$0.00
The result i total expen	hly expenses. Add lines 4 is the monthly expenses of ses for Debtor 1 and Debtor 1 and Debtor 1 is form.	Debtor 2. Copy the resu	alt to line 22b of Scho	edule J to calculate the	22.	\$0.00
	pect an increase or dec			ou vou file this form?		
For exam	ole, do you expect to finish payment to increase or de	n paying for your car loan	within the year or d	o you expect your		

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Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Joseph	D.	Lanza	
	First Name	Middle Name	Last Name	
Debtor 2	Laura	R.	Lanza	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number			(Ciaio)	

Official Form 106Dec

Check if this is an
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to I	help you fill out bankruptcy forms?						
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and						
×	/s/ Joseph Lanza	🗶 /s/ Laura Lanza						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 2/15/2017	Date 2/15/2017						
	MM/DD/YYYY	MM/DD/YYYY						

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		Document	Page 54 01 76	
Fill in this info	rmation to identify your case:			
Debtor 1	Joseph First Name	D. Lanza Middle Name Last Nam	e	
Debtor 2 (Spouse, if filing)	Laura First Name	R. Lanza Middle Name Last Nam	<u> </u>	
United States	Bankruptcy Court for the: Norther			
Case number (If known)		(State	e) 	_
Official	Form 107			Check if this is an amended filing
Stateme	ent of Financial Affa	airs for Individuals	Filing for Bankruptcy	12/15
information. number (if kr	If more space is needed, attac nown). Answer every question.	h a separate sheet to this form	together, both are equally responsible. On the top of any additional pages, Before	
1. What is	s your current marital status?			
	arried ot married			
2. During	the last 3 years, have you lived a	nywhere other than where you liv	ve now?	
✓ No		n the last 3 years. Do not include v	where you live now.	
De	btor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
			Same as Debtor 1	Same as Debtor 1
Nu	mber Street	From	Number Street	From
		То		То
Cit	y State Zip Co	de	City State Zip Cod	de
			Same as Debtor 1	Same as Debtor 1
Nu	mber Street	From To	Number Street	From To

and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states

City

State

Zip Code

✓ No

City

State

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Zip Code

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Lanza

D.

Debtor 1 Joseph Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$227.54 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$44000.00 Wages, \$6475.62 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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D. Lanza Debtor 1 Joseph __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... 12/2016 - 2/2017 **V** Mortgage First National Bank and Trust \$2763.00 \$104800.00 Creditor's Name Car 345 E Grand Ave Credit card Number Street Attn: Bankruptcy Dept. Loan repayment BELOIT Wisconsin 53511 Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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Debtor 1	Joseph		D.	Lanz	za	Case number	if known)
	First Name		Middle Name	Last	Name		•
Insi corp age suc	ders include your porations of which int, including one h as child suppor	relatives; an you are an for a busine	ny general partners n officer, director, p ess you operate as	; relatives of any g person in control, o	eneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; securities; and any managing domestic support obligations,
⊻	No						
	Yes. List all pay	ments to a	n insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	der? ude payments on No	debts guar	for bankruptcy, denteed or cosigned	d by an insider.	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name						
	Number Street						
	-						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Lanza Debtor 1 Joseph D. Case number (if known) Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Joseph First Name	D. Middle Name	Lanza Last Name	Case number (if known)	
11.	Within 90 days before you accounts or refuse to make			ank or financial institution, set off any am	ounts from your
	✓ No ✓ Yes. Fill in the details.				
			Describe the action the	creditor took Date action was taken	Amount
	Creditor's Name		-		-
	Number Street		Last 4 digits of account n	umber: XXXX-	
	City Stat	te Zip Code			
12.		led for bankruptcy, was		possession of an assignee for the benefit o	f creditors, a court-
	✓ No ✓ Yes	,			
Part		nd Contributions			
13.	Within 2 years before you	ı filed for bankruptcy, dic	d you give any gifts with a to	tal value of more than \$600 per person?	
	✓ No Yes. Fill in the details	for each gift.			
	Gifts with a total valu	e of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You C	Gave the Gift	-		
	Number Street		-		
	City Stat Person's relationship to	•	-		
	Person to Whom You C	Gave the Gift	-		-
	Number Street		-		
	City Stat Person's relationship to	•			

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Debt		Joseph	D.	Lanza	Case number (if know	vn)	
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed t	for bankruptcy, did	you give any gifts or contril	butions with a total value	of more than \$600	to any charity?
		No		,		•	
	뇓	Yes. Fill in the details for ea	ch aift ar contributio	on.			
	Ш						
		Gifts or contributions to ch that total more than \$600	narities	Describe what you con	tributed	Date you contributed	Value
		that total more than 4000				Contributed	
		Charity la Nama					
		Charity's Name					
		Number Street					
		City State	Zip Code				
Dort	6.	List Certain Losses					
15.		hin 1 year before you filed fo nbling? No Yes. Fill in the details.				ause of theft, fire,	other disaster, or
		Describe the property you how the loss occurred	lost and	Include the amount that pending insurance claims A/B: Property.	insurance has paid. List	Date of your loss	Value of property lost
Part	7:	List Certain Payments o	r Transfers				
16.	abo	hin 1 year before you filed fout seeking bankruptcy or prude any attorneys, bankruptcy	eparing a bankrupt	cy petition?			inyone you consulted
		No					
	✓	Yes. Fill in the details.					
				Description and value of transferred	of any property	Date payment or transfer was made	Amount of payment
		Springer Law Firm		Attorney's Fee - 600.00		2/1/2017	\$600.00
		Person Who Was Paid		rationary or do doctor			
		2222 E State St.					
		Number Street					
		# 107					
		Rockford Illinois	61104				
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payme	ent, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payme	ent, if Not You				

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Debto		Joseph	D.	Lanza	Case number (if known)		
		First Name	Middle Name	Last Name				
	help	hin 1 year before you filed to you deal with your credit not include any payment or to	ors or to make paym		ur behalf pay or transfer	r any property to a	anyone v	who promised to
		Yes. Fill in the details.						
	Ш	res. I ill lit the details.		Description and value of an transferred	y property	Date payment or	Amou	ınt of payment
						transfer was made		
		Person Who Was Paid						
		Number Street						
		City State	Zip Code					
	Incl	ordinary course of your builded both outright transfers at transfers that you have alread No Yes. Fill in the details.	nd transfers made as s	security (such as the granting of a	security interest or mortga	age on your proper	ty). Do n	not include gifts
				Description and value of an property transferred		y property or eceived or debts p	oaid	Date transfer was made
		Person Who Received Trans	sfer					
		Number Street						
		City State Person's relationship to you	Zip Code					
		Person Who Received Trans	sfer					
		Number Street						
		City State Person's relationship to you	Zip Code					
	ben	hin 10 years before you file eficiary? ese are often called asset-pro		d you transfer any property to a	self-settled trust or sim	nilar device of whi	ich you	are a
	✓	No Yes. Fill in the details.						
	_			Description and value of t	he property transferred			Date transfer was made
		Name of trust						

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D. Lanza Debtor 1 Joseph Case number (if known) Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Lanza Debtor 1 Joseph D. Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value 7808 East Brick School Road Family Members Automotive Parts, Tools, Owner's Name **NumberStreet** Pneumatic/Motarized Equipment Number Street Rock City Illinois 61070 Zip Code City State City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb		Joseph		D.	Lanza	Case	e number <i>(if</i>	known)	
		First Name		Middle Name	Last Name				
26.	Hav	e you been a part	y in any judic	ial or administ	rative proceeding unde	er any environmen	tal law? In	clude settlements and	l orders.
	V	No							
	Ħ	Yes. Fill in the det	tails.						
	ш				Court or agency		Nature o	of the case	Status of the
									case
		Case title							Pending
					Court Name				L rending
					Number Street	_			On appeal
		Case number			Number Street				Concluded
					City State	Zip Code			
		O: D-4-:1- AI	- D						
Pari	111:	Give Details At	out Your B	usiness or Co	onnections to Any B	usiness			
27.	With	nin 4 years before	you filed for	bankruptcy, did	d you own a business o	r have any of the f	following c	onnections to any bus	iness?
		-				-	_	-	
					ade, profession, or othe	-	ull-time or p	part-time	
					LLC) or limited liability p	artnership (LLP)			
		A partner in a	a partnership						
		An officer, di	rector, or ma	naging executiv	ve of a corporation				
		An owner of	at least 5% o	f the voting or e	equity securities of a co	rporation			
		No. None of the a	abovo applios	Co to Part 12					
	믬				details below for each	husinoss			
	✓	res. Offect all the	αι αρριγ αυυν	re and illining				Foods outdoors	to a contract to the second
					Describe the nat	ture of the busines	SS	Employer Identificat include Social Secur	
		Mavrik Enterprises	LLC					EIN:	•
		Business Name			_			EIIN.	
		7808 East Brick S	chool Road					Datas businasa sulat	
		Number Street			Name of accoun	Name of accountant or bookkeeper		Dates business existed	
		Rock City City	Illinois State	61070 Zip Code	_	tant or bookkeep	C1	From To .	
		Oity	Otato	2.6 0000					
					Describe the nat	ture of the busine:	ss	Employer Identificat	
								include Social Secur	rity number or ITIN.
		Business Name						EIN:	
		_ 20000 14000							
		Number Street						Dates business exist	ted
					Name of accoun	tant or bookkeep	er		
		City	State	Zip Code				FromTo	
					Describe the not	ture of the busine:		Employer Identificat	ion number Do not
					Describe the nat	ture of the busines	SS	Employer Identificat include Social Secur	
								EIN:	•
		Business Name			_			LIIV.	
		Newshare Co.			_			Datas husinasa a 121	
		Number Street			Name of accoun	tant or bookkeep	er	Dates business exist	leu
		City	State	Zip Code	—	or bookkeep	0.1	Erom T	
		Oity .	Sidio	Lip Joue				From To _	

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Debte	or 1 Joseph		D.	Lanza	Case number (if known)
	First Name		Middle Name	Last Name	
	creditors, or No	rs before you filed fo other parties. in the details below.	r bankruptcy, did y	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
				Date issued	
	Name			MM/DD/YYYY	
	INAIIIE			, 25,	
	Numbe	r Street			
	0''	0: :	7. 0. 1	<u> </u>	
	City	State	Zip Code		
Part	12: Sign B	elow			
tr	rue and corre	ect. I understand that case can result in fin	t making a false sta es up to \$250,000,	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debto			Signature of Debtor 2
		Date 2/15/2017			Date 2/15/2017
D	id you attacl	n additional pages to	Your Statement of	Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
Ī,	√ No				
Ī	Yes				
D	id you pay o	agree to pay someo	ne who is not an at	ttorney to help you fill out l	pankruptcy forms?
Ī.	✓ No				
Ē	Yes. Name	e of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:				
Debtor 1	Joseph	D.	Lanza	
	First Name	Middle Name	Last Name	
Debtor 2	Laura	R.	Lanza	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number (If known)			(,	

Check if this	is an
amended	filina

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: First National Bank and Trust Description of property securing debt: 7808 East Brick School Road , Rock City, IL 61070 Value: \$112,869.00	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. ✓ Yes.
Creditor's name: German American State Bank Description of property securing debt: Business Loan	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	V No. ☐ Yes.
Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.
Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.

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Debtor	Joseph	D.	Lanza	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired P	ersonal Property Lea	ses		
informa		l estate leases. Unexpire	d leases are leases that a	Contracts and Unexpired Leases (Official Form 1 are still in effect; the lease period has not yet en U.S.C. § 365(p)(2).	
De	scribe your unexpired pers	onal property leases		Will the lease be assume	ed?
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			-	
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:				
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			-	
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			-	
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			_	
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			_	
Les	ssor's name:			☐ No ☐ Yes	
	scription of leased perty:			_	
Part 3:	Sign Below				
Unde			I my intention about any p	property of my estate that secures a debt and an	y personal
×	/s/ Joseph Lanza		X /s	/ Laura Lanza	
S	ignature of Debtor 1		Sign	nature of Debtor 2	_
D	Pate 2/15/2017 MM/DD/YYYY		Date	e 2/15/2017 MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Joseph D. Lanza ; Laura R. Lanza	Case No.	
	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPENSA	TION OF ATTORNEY FO	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing crendered or to be rendered on behalf of the debtor(s) in con	of the petition in bankruptcy, or agreed to b	pe paid to me, for services
	For legal services, I have agreed to accept		\$600.00
	Prior to the filing of this statement I have received		\$600.00
	Balance Due		\$0.00
2.	The source of the compensation paid to me was:		
	Debtor Other (sp	ecify)	
3.	The source of the compensation paid to me is:		
	Debtor Other (sp	ecify)	
4.	I have not agreed to share the above-disclosed compermembers and associates of my law firm.	nsation with any other person unless they	are
	I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the age the people sharing in the compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspects of the bankru	uptcy case, including:
6.	By agreement with the debtor(s), the above-disclosed fee de	oes not include the following services:	
	CER	TIFICATION	
	certify that the foregoing is a complete statement of any agr or(s) in this bankruptcy proceedings.	eement or arrangement for payment to me	for representation of the
	2/15/2017	/s/ Dan Springer	
	Date	Signature of Attorney	
		Springer Law	
		Name of law firm	

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Desc Main

Springer Law Firm

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815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$600. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement.
- I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Print Name:

Attorney Signature:

Signature: >

Print Name: - VSEDV

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Lanza, Joseph D.; Lanza, Laura R.	Case No.	
	Debtor(s)	3430110.	
		Chapter. Chapter7	
	VERIFICATION	I OF CREDITOR MATRIX	
knowle		attached list of creditors is true and correct to the best of their	
Date:	2/15/2017	/s/ Lanza, Joseph D.	
		Lanza, Joseph D. Signature of Debtor	
		/s/ Lanza, Laura R.	
		Lanza, Laura R. Signature of Joint Debtor	

Federal Loan Servicing Credit PO Box 60610 Attn: Bankruptcy Dept. HARRISBURG, PA, 17106

AES/ESA PO Box 61047 HARRISBURG, PA, 17106

Chase Bank USA PO Box 15298 Attn: Bankruptcy Dept. WILMINGTON, DE, 19850

Capital One Bank USA NA PO Box 30281 Attn: Bankruptcy Dept. SALT LAKE CITY, UT, 84130

First National Bank and Trust 345 E Grand Ave Attn: Bankruptcy Dept. BELOIT, WI, 53511

SYNCB/Old Navy DC PO BOX 965005 ORLANDO, FL, 32896

Discover Financial Services PO Box 15316 WILMINGTON, DE, 19850

US Cellular 8410 W. Bryn Mawr Attn: Bankruptcy Dept. CHICA, IL, 60631

Diversified Adjustment Service 600 Coon Rapids Boulevard Attn: Bankruptcy Dept. MINNEAPOLIS, MN, 55432

Freeport Health Network 10 West Linden Street FREEPORT, IL, 61032

German American State Bank 100 Church Street GERMAN VALLEY, IL, 61039 Siepert & Co. LLP 5302 Williams Drive Roscoe, IL, 61073

Presta Loan Servicing PO Box 737 Milan, IL, 61264